

SUMMARY FORM**COLLECTIVE BARGAINING AGREEMENT**
PUBLIC SECTOR / NON-POLICE & NON-FIRE**Section I: Agreement Details**

Public Employer: Borough of Jamesburg County: Middlesex
 Employee Organization: Public Works Local #210 Employees in Unit: 3
 Base Year Contract Term: 1/1/2009 12/31/2011 New Contract Term: 1/1/2012 12/31/2013
 Type of Settlement: Mediated Settlement Fact-Finder Recommendation Voluntary Settlement Super Conciliation

	Column A <u>Base Year - Total Costs</u> (Last Year of Previous agreement)	Column B <u>New Base Year - Total Costs</u> (First Year of Successor agreement)
Item 1	\$163,646	\$170,426
Item 2	\$13,000	\$13,000
Item 3	\$5,700	\$5,700
Item 4		
Item 5		
Item 6		
Item 7		
Item 8		
Item 9		
Item 10		
Item 11		
Item 12		
Any additional items list on separate sheet	Additional Items	
Section III: Totals - Sum of costs in each column	\$182,346 (Total)	\$189,126 (Total)

Section IV: Analysis of new successor agreement**NEW AGREEMENT ANALYSIS**Total Base Year (previous agreement) \$182,346

<u>Effective Date (m/d/yyyy)</u>	<u>1/1/2012</u>	<u>1/1/2013</u>				
Percent Increase	0%	0%				
Total cost of increase	\$6,780	\$9,762				
Total base salary (successor agreement)	<u>\$189,126</u>	<u>\$198,688</u>				

Section V: Impact of Settlement - average annual increase over term of agreementPercentage Impact (average per year over term of agreement) 0.00Dollar Impact (average per year over term of agreement) \$8,271.00**Section VI**

	<u>Base Year</u>	<u>Year 1</u>				
Cost of Health Plan	<u>\$48,875</u>	<u>\$54,770</u>				
Employee Contributions		<u>\$3,110</u>				
Prescription	<u>\$13,385</u>	<u>\$15,336</u>				
Dental	<u>\$860</u>	<u>\$954</u>				
Vision						

*The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, s/he is subject to punishment.***Section VII**

Prepared by: Denise Jawidzik Title: Administrator/CFO
 Print Name: 
 Signature: _____ Date: 5/14/2012